PTO/SB/06 (12-04)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								12	Application of Docket Number 91761040		
APPLICATION AS FILED - BART I											
L	(Column 1)				(Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR NUMBER FILED		NUMBER EXTRA		7			7	ONIAL	LEMINY	
BASIC FEE		110.11	DEN PIDED	RUM	BER EXTRA	1	RATE (\$)	FEE (\$)	4	RATE (\$)	FEE (3)
(37 CFR 1.16(a), (b), or (c)) SEARCH FEE						4					
(37 CFR 1.16(x), (I), or (m))		ļ:				_		1			
EXAMINATION FEE (37 CFR 1.18(0), (p), or (q))				1		7			1		
TOTAL CLAIMS (37 CFR 1.16(I))			-t 20	1.		1	-		1	 	+
INDEPENDENT CLAIMS		+	minus 20 =			-	X =		OR	x -	
(37 CFR 1.16(h))		1645	minus 3 =	<u> </u>	<u> </u>		X =			х .	
APPLICATION SIZE If the specification and drawings exceed 100 sheets of paper, the application size fee due											
FE.	E CFR 1.15(s))	Is \$250 (\$125 for sma	il entity) fo	r each					1	1 .
(37 CFR 1.15(e)) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C				and 37 CF	nereor. See R 1.16(s).						İ
MU	LTIPLE DEPENDENT			1		1.	1		-		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(I))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		j	TOTAL	
APPLICATION AS AMENDED - PART II 9/20/06											
(Column 1) (Column 2) (Column 3)							SMALL ENTITY		ÇR	OR OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS EMAINING	1 1 1	HIGHEST NUMBER	PRESENT		RATE (\$)	ADD1-	1		
	AM	AFTER ENDMENT		EVIOUSLY AID FOR	EXTRA			TIONAL	l	RATE (\$)	ADDI- TIONAL
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	Independent (37 CFR 1.16(N))	<i>=</i>	Minus ***	TI	= 1	ŀŀ	X =		OR	XOU:	50
		<u>-:</u>				1	X =		OR	x200 =	200
Ā	Application Size Fee (37 CFR 1.16(s))					H					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.180)					L			OR		
$\dot{\Omega} = \Omega$							TOTAL ADD'L FEE		OR	TOTAL	250
	(C)	otume 1)	7	Column 2)					J 0.1	ADD'L FEE	رمص
		LAINS		IGHEST	(Cotumn 3)	F	· ·		i i		
AMENDMENT B		MAINING AFTER		UMBER EVIOUSLY	PRESENT EXTRA		RATE (\$)	ADDI-		RATE (\$)	ADDI-
		NOMENT	P	AID FOR		- L		TIONAL FEE (\$)			TIONAL FEE (\$)
	(37 OFR 1.16(1))	X(D)	Minus	$\mathcal{X}(\mathcal{U})$.	×		OR	X =	
	tridependent (37 OFR 1.16(N))	5	Minus -	5	•	1	x =				
	Application Size Fee 37 CFR 1.16(s))					ŀ	× =		OR	X =	
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)										
	-			(5. 51.		L			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2 water and in any in any											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". The "Highest Number Previously Paid For" (Total or Independent is the highest number previously Paid For" (Total or Independent is the highest number previously Paid For "Total or Independent is the highest number previously Paid For" (Total or Independent is the highest number to the highest number previously Paid For "Total or Independent is the highest number previously number											
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The Highest Number Previously Paid For' (Total or Independent) is the highest number tound in the appropriate box in column 1.

This obliection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.